



MHSPHP Metrics Forum

Antidepressant Medication
Management

And

Mental Health Follow-up

Dec 2013

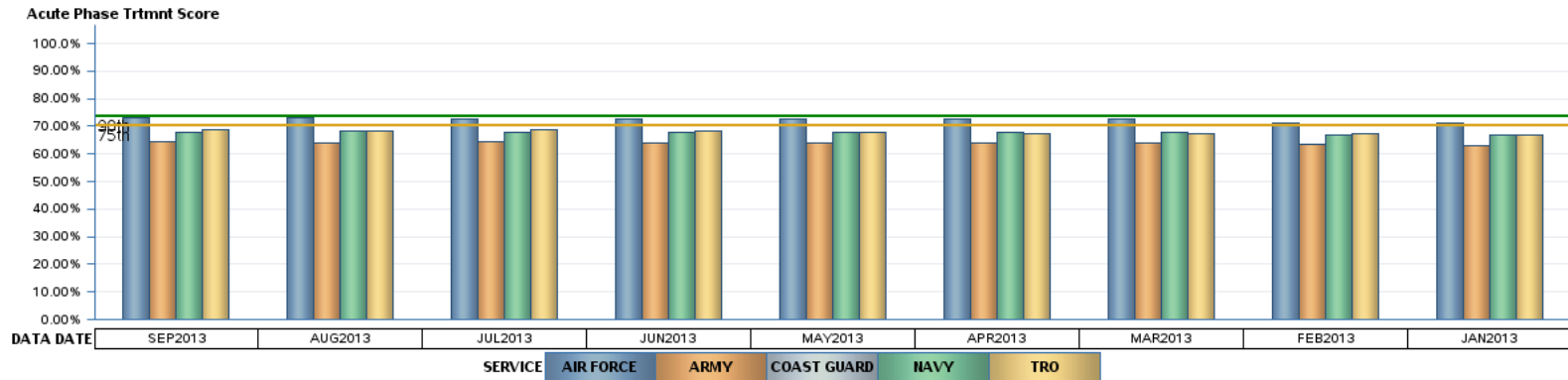


- Antidepressant Medication Management
 - Methodology
 - FAQ highlights
 - Metric challenges
- Mental Health Follow-up
 - Methodology
 - FAQ highlights
 - Metric challenges
- Depression List



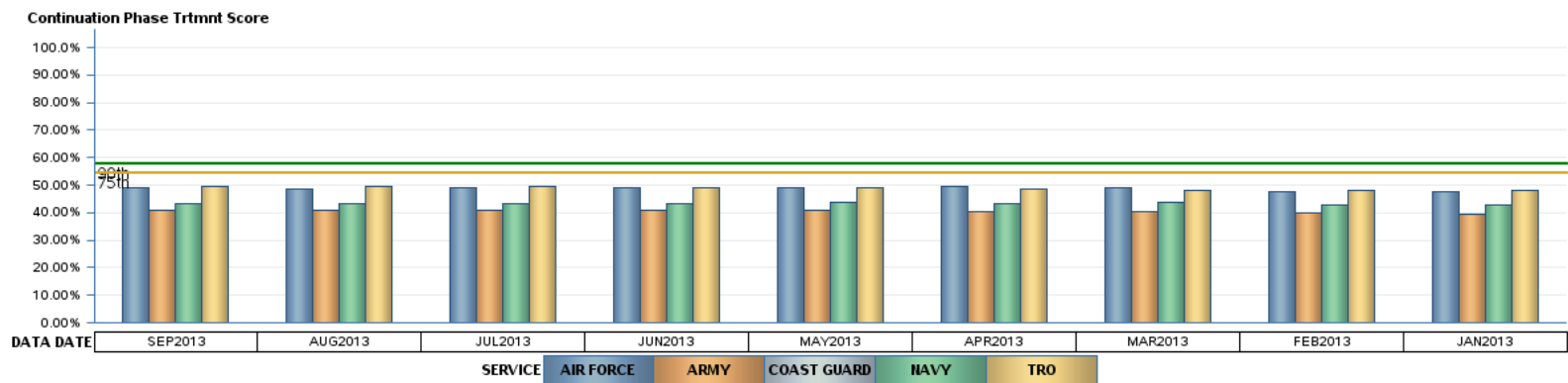
AMM: Effective Acute Phase Treatment

Applied filters: None



AMM: Effective Continuation Phase Treatment

Applied filters: None



Antidepressant Medication Management

- The percentage of members 18 years of age and older who were dispensed a NEW prescription of antidepressant medication associated with a diagnosis of MAJOR depression, and who remained on an antidepressant medication treatment.
 - *Effective Acute Phase Treatment.* The percentage of treated members who remained on an antidepressant medication for at least 84 days (12 weeks).
 - *Effective Continuation Phase Treatment.* The percentage of newly treated members who remained on an antidepressant medication for at least 180 days (6 months).



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Metric Enrollment Criteria

- Age over 18 and continuously enrolled in Prime from 90 days (3 months) prior to the initial dispensing date through 245 days after the initial dispensing date
- A lapse of a single month of enrollment at any time is still continued continuously enrolled

Step 1: Find pts with major depression in measurement period

Major Depression ICD-9-CM Diagnoses

296.20-296.25, 296.30-296.35, 298.0, 311

- At least 1 principal diagnosis of major depression in an outpatient, ED, intensive outpatient or partial hospitalization setting (Table AMM-B), **or**
- At least 2 visits in an outpatient, ED, intensive outpatient or partial hospitalization setting on different dates of service with any diagnosis of major depression **or**
- At least 1 inpatient (acute or nonacute) claim/encounter with any diagnosis of major depression



Major Depression Diagnoses

- 296.20-296.25 Major depressive disorder, single episode (not in remission)
- 296.30-296.35 Major depressive disorder, recurrent episode (not in remission)
- 298 Depressive type psychosis
- 311 Depressive disorder, not elsewhere classified



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Step 2

- Find date of earliest major depression diagnosis for those pts in step 1
- Select patients who were dispensed antidepressants 30 days before through 14 days after that diagnosis date

Step 3: Only Newly Treated

- Remove all patients who had other dispensing events of antidepressants in the 90 days prior to this dispensing event that is associated with the diagnosis date
- Remaining continuously enrolled major depression pts over age 18 with new dispensing of antidepressants are the denominator



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Numerators

- Acute Phase: received 84 days supply of meds within the first 114 days of treatment
- Continuation Phase: received 180 days supply of meds within first 231 days of treatment
- This allows for some treatment gaps
- Meds dispensed toward end of phase:

The actual number of calendar days covered with prescriptions within the specified 180-day (6-month) measurement interval. For Effective Continuation Phase Treatment, a prescription of 90 days (3 months) supply dispensed on the 151st day will have 80 days counted in the 231-day interval.

FAQ: Why so long?

8. Why would patients need to stay on the medications when they feel better?

- This metric is based on the American Psychiatric Association's (APA) Practice guideline for the treatment of patients with major depressive disorder. It recommends that patients remain on medication 6-11 months to avoid relapse. This issue should be discussed with the patient prior to initiating therapy.
- This is the recommended standard of care for patients with major depressive disorder

What if provider doesn't think pt will need full treatment?

- These diagnoses do not put patient on the metric; however, they do not remove patients identified in steps 1-3 either.
- 300.4 Dysthymic disorder
 - Depression precipitated by events in a person's life.
 - Chronic affective disorder characterized by either relatively mild depressive symptoms or marked loss of pleasure in usual activities.
- 309.0 Adjustment disorder with depressed mood
- 309.1 Prolonged depressive reaction
- Providers need to know which codes diagnoses map to in AHLTA



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How long are patients on the list?

12. How do patients come off the list?

- Patients fall off the list when their [initial diagnosis](#) date is no longer in the [identification period](#) which means the diagnosis is older than 20 months prior to the “As of date” at the top of the page in the MHSPHP. Patients cannot be removed from the list for any other reason.



included

	looking for continuous enrollment																												
	90 days looking for negative meds			Looking for pts with NEW dispensing of antidepressants (none in preceding 3 months) and a diagnosis of Major depression within 30 days of dispensing												Allow for looking for 6 months worth of dispensing events of antidepressant meds (in 8 month period) for last pt identified in measure													
				1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8						
For As of Date: 31 Oct 2013	Dec 2011	Jan 2012	Feb 2012	Mar 2012	Apr 2012	May 2012	Jun 2012	Jul 2012	Aug 2012	Sep 2012	Oct 2012	Nov 2012	Dec 2012	Jan 2013	Feb 2013	Mar 2013	Apr 2013	May 2013	Jun 2013	Jul 2013	Aug 2013	Sep 2013	Oct 2013						
examples :				individual Patients initial medication dispensing on:																									
				6-Mar-12	8 month window looking for 6 months worth of dispensing events																								
					*****	8 month window looking for 6 months worth of dispensing events																							
											1-Oct-12	8 month window looking for 6 months worth of dispensing events																	
															3-Feb-13	8 month window looking for 6 months worth of dispensing events													
															2-Mar-13	8 mon window looking for 6 mon of dispensing events isn't complete yet -not on metric, NA on list													

Each patient has their own measurement period. The metrics population will include all pts who had their initial dispensing in the purple window—these are patients who completed both acute and continuation measurement windows. All pts diagnosed after the purple window will be on the list but are not YET on the metric because they are still in their dispensing window.



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FAQ: Why are list numbers so different from the metric?

- Patients hit the metric for the DMIS they are enrolled to when the meds are initially prescribed
 - Patients will PCS or even disenroll during the year they are included in metric (for one year after completing 231 day measurement period)
- Patients who have not completed their measurement period are on the list, too (“NA” if not completed acute or continuation phase)

CarePoint

Overview [Patient Management] Administration Methodology Documents

Patient Mar

ACTION LISTS

PREVALENCE REPORTS

OTHER LISTS

Export Status

Asthma Medications

Antidepressant Med Mgt

Back Pain, Acute

Back Pain, Re

Low Back Pain

Cardiovascular

CHF

Cholesterol in

Diabetes Micro

High Utilizers

High Utilizers

Hypertension

Quick Look

COPD

Depression

Lipid Panel

Well Child

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AMM Patient List

Earliest Diagnostic Date	Visits	Hospitalizations	Prescription Date	Trmt Days >=84	Trmt Days >=180
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3/1/2012	4	0	2/29/2012	Y	Y
8/16/2012	3	2	7/30/2012	Y	Y
5/21/2012	3	0	5/21/2012	Y	N
5/21/2012	5	0	5/17/2012	Y	Y
2/9/2012	3	0	2/10/2012	Y	Y
6/11/2012	2	1	6/16/2012	N	N
11/25/2012	2	1	11/28/2012	Y	Y
2/1/2013	14	0	1/23/2013	N	N
8/28/2012	1	0	8/28/2012	Y	N
5/7/2013	2	0	5/7/2013	Y	NA
11/1/2012	1	0	11/1/2012	Y	Y
5/2/2012	0	1	4/13/2012	Y	Y
2/28/2012	7	0	2/7/2012	Y	Y
8/7/2013	3	0	8/7/2013	NA	NA

Y=met
N= not met
NA= patient is still in measurement window, so cannot total meds dispensed yet

- Earliest Diagnosis Date: Initial major diagnosis
- Visits: total number of visits for depression in last 20 months
- Hospitalizations: total number of hospitalizations with depression as diagnosis
- Prescription Date: Initial antidepressant dispensing event
- Trmt Days>=84— Did pt met acute criteria of receiving 84 days of meds in the initial 114 days?
- Trmt Days>=180– Did pt met continuation criteria of receiving 180 days of meds in initial 231 days?



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Patient Details

Patient Lists

Patient Lists

[Colon Cancer](#)

[Hypertension](#)

[Depression](#)

[Antidepressant Meds Mgt](#)

Antidepressant Meds Mgt

Patient Data

Earliest Diagnostic Date :	02/13/2012
Visits :	7
Hospitalizations :	0
Prescription Date :	02/13/2012
Trmt Days >= 84 :	Y
Trmt Days >= 180 :	Y
Note :	

Close

Depression

Patient Data

Outpatient Visit Prime :	1
Outpatient Visit Sec :	3
Inpatient Visit :	
ER Visit Prime :	
ER Visit Sec :	
Source :	
Severity :	
Note :	

Patient Visits

Date	Description	Facility	Facility Name	DX
06/04/2013	DIRECT	0117	59th MED WING-LACKLAND	
03/15/2013	DIRECT	0117	59th MED WING-LACKLAND	
11/15/2012	DIRECT	0117	59th MED WING-LACKLAND	

Close



- Medication Adherence following recommended standards
 - Provider education re: APA recommendations
 - Patient education with initial diagnosis that this is long term therapy
 - Monitor side effects and switch antidepressants as needed
 - Timely follow-up to manage adherence
- Proper coding of Major Depression
- Diagnosed outside of MTF: work with managed care support contractor to look for trends in misdiagnosis for network provider education



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AMM Best Metrics

DATA DATE			SEP2013		
			Eligible	Acute Phase Trtmt Score	Continuation Phase Trtmt Score
SERVICE	COMMAND	DMIS			
[-] [v] NAVY	[-] [v] NAVMED_E	[+] [v] 0381 INST: YORKTOWN	42	76.19%	69.05%
		[+] [v] 0129 INST: F.E. WARREN AFB	94	84.04%	64.89%
[-] [v] AIR FORCE	[-] [v] AFGSC	[+] [v] 0033 INST: USAF ACADEMY	304	82.57%	62.83%
	[-] [v] AFGSC	[+] [v] 0077 INST: MALMSTROM AFB	114	78.07%	62.28%
	[-] [v] AFMC	[+] [v] 0095 INST: WRIGHT-PATTERSON AFB	416	83.41%	62.26%
	[-] [v] ACC	[+] [v] 0106 INST: ELLSWORTH AFB	147	78.23%	61.90%
	[-] [v] AETC	[+] [v] 0366 INST: JOINT (AF) SAN ANTONIO RAF-LAF-FSH	289	82.70%	60.55%
	[-] [v] JTF	[+] [v] 0256 INST: PENTAGON	63	79.37%	60.32%
[-] [v] AIR FORCE	[-] [v] PACAF	[+] [v] 0203 INST: EIELSON AFB	65	84.62%	60.00%
[-] [v] NAVY	[-] [v] NCA	[+] [v] 0306 INST: ANNAPOLIS	62	72.58%	59.68%
[-] [v] ARMY	[-] [v] JTF	[+] [v] 6200 INST: FAIRFAX	166	84.34%	59.64%
[-] [v] AIR FORCE	[-] [v] AETC	[+] [v] 0097 INST: ALTUS AFB	47	72.34%	59.57%
	[-] [v] ACC	[+] [v] 0053 INST: MOUNTAIN HOME AFB	143	81.12%	59.44%
[-] [v] ARMY	[-] [v] WRMC	[+] [v] 6116 INST: JOINT (AF) BASE LEWIS-MCCHORD	88	76.14%	59.09%



- Changed denominator criteria:
- Same identification period (12 months that ends 8 months before metric month)
- Step 1: find earliest dispensing of antidepressants in that 12 month period
- Step 2: only include patients who had at least one major depression diagnosis (inpt, outpt, er or partial hospitalization) during 60 days prior through 60 days after the initial dispensing date
- Step 3: Newly treated means no antidepressants dispensed in the 105 day before the initial dispensing event identified in step 1
- 2 new antidepressants: Desvenlafaxine and Forfivo XL

2013 vs 2014 specifications

2013

- Same ICD9 codes
- Start with Earliest dx in 12 month identification period (IP)
- Initial Dispensing occur within 30 before to 14 days after initial dx
- Must have at least 1 er, 1 inpt or 2 outpt major depression dx in 12mon IP
- Negative med history of 90 days prior to 1st dispensing in IP
- Continuous enrollment of 90 days prior to 1st dispensing through 231 days after

2014

- Same diagnoses
- Start with earliest antidepressant dispensing
- DX occur within 60 days before to 60 days after 1st dispensing
- 1 outpt, er or inpt dx around 1st dispensing will suffice
- Negative med history of 105 days prior to 1st dispensing in IP
- Continuous enrollment of 105 days prior to 1st dispensing through 231 days after



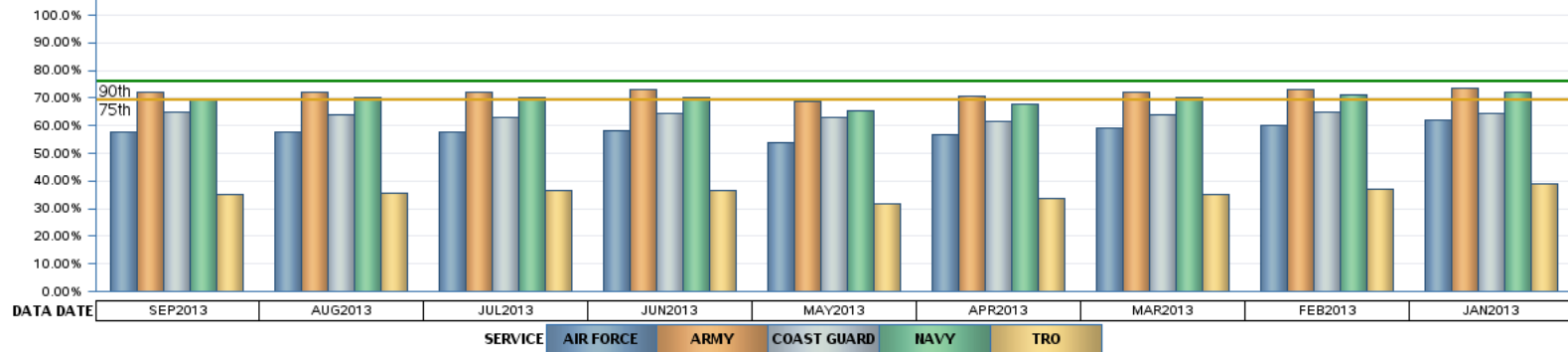
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Mental Health Follow-up

Follow-Up after Hospitalization for Mental Illness: within 7 Days of Discharge

Applied filters: None

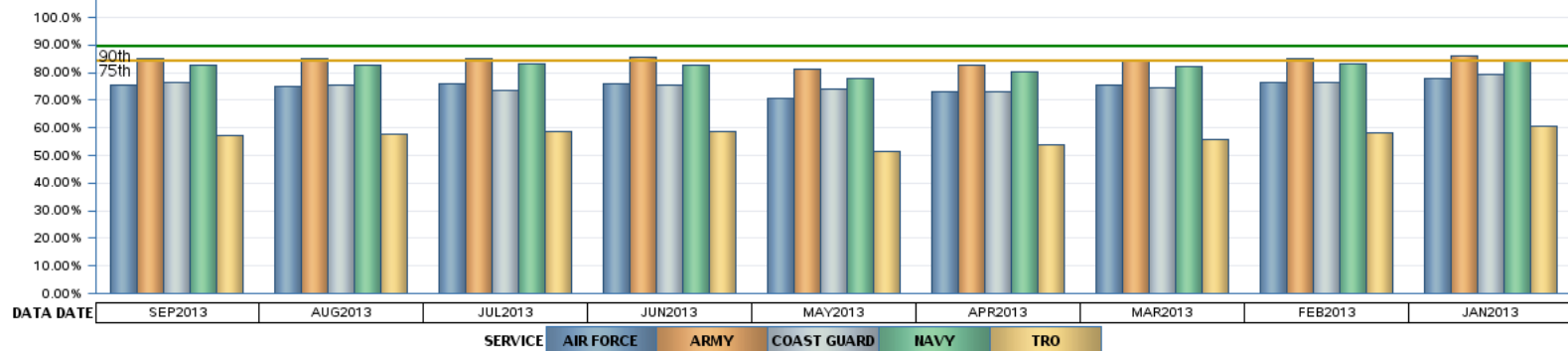
7 Days Score



Follow-Up after Hospitalization for Mental Illness: within 30 Days of Discharge

Applied filters: None

30 Days Score





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Mental Health Follow-up

- Percent of TRICARE Prime enrolled patients who received follow-up within 7 days of mental health primary diagnosis discharge.
- Percent of TRICARE Prime enrolled patients who received follow-up within 30 days of Mental Health Primary diagnosis discharge.



Primary Diagnoses Included

- Schizophrenia (295.x)
- Episodic Mood Disorders (296.x)
- Delusional Disorders (297.x)
- Psychoses (298.x)
- Pervasive Developmental Disorders (299.x)
- Obsessive Compulsive Disorders (300.3)
- Dysthymic Disorders (300.4)
- Personality Disorders (301.x)
- Acute Reaction to Stress (308.x)
- Adjustment Reaction (309.x)
- Depressive Disorder (311.x)
- Disturbance of Conduct (312.x)
- Disturbance of emotions specific to childhood and adolescence (313.x)
- Hyperkinetic syndrome of childhood (314.x)

- Over age 6
- Excludes patients with another admission of any type within 30 days of discharge date
- Looks at discharges in first 11 months of the 12 month period ending on “current as of date”



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FAQ: What are the enrollment criteria for the patients attributed to my MTF's HEDIS[®] metric?

- The enrolled DMIS location for the month of the discharge is the where the patient impacts the metric.
- If the patient PCSs or separates, they remain in the metric until their discharge no longer occurred in the first 11 months of the last year. In other words, these patients will remain in the metric reports for almost a year.
- Patients only need to be enrolled for the admission month and the month after the admission to be included in the metric. There are no long term continuous enrollment criteria for

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FAQ: Which provider visits count?

CHCS Spec Code	Description
070	Psychiatrist
071	Child Psychiatrist
072	Psychoanalyst
073	Psychiatric Resident/Intern With License
074	Alcohol Abuse Counselor
075	Drug Abuse Counselor
076	Physicians/Psychiatry and Neurology/Addictive/Psychiatry
505	Psychiatry Consultant
601	Mental Health Nurse
611	Psychiatric Nurse Practitioner
702	Clinical Psychologist
703	Psychology Social Worker
714	Social Work Case Manager (only for encounters in MEPRS BF**)



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MH Metric Comparison Challenges

- What type of population served?
 - Active duty only
 - AD, dependents, retirees, VA
- Where are the discharges from?
 - Purchased Care
 - MTF
- Where is the follow-up going to be?
 - Network Care
 - MTF
- Learn from MTFs with similar populations



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What type of Population served?

Active Duty only

- Many DMIS locations have only active duty enrollees
- These locations should be doing well on metrics due to civilian facilities must contact MTF when admitting
- MTF in more control of processes involved

Mixed Enrollee Beneficiaries

- How does MTF get notified of purchased care
- Where will follow-up care be since many MTFs only provide outpt mental health service to active duty
- We do not receive VA patient inpatient or outpatient encounter data—so if patient seen in VA, no encounter captured



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Where are the discharges from?

MTF

- MTF knows when the pt is being discharged
- Might not be your MTF (DMIS)
- MTFs who admit for these diagnoses must make sure pts have follow-up within 7 days scheduled before discharge

Purchased Care

- Communication with Managed Care Support Contractor and mental health facilities key to success
- Admitting facilities know must notify MTF for Active duty admissions
- Non-active duty can self refer to mental health so PCM may not be in loop, but facility must contact TRICARE to coordinate coverage
- Managed Care support contractor has admission and discharge info: must improve communication



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Where is Follow-up Care for patient?

MTF

- If you provide Mental health care to that category of patient, then MTF needs to ensure pts are scheduled within 7 days of discharge
- Continuity is very important, so ensure follow-up is at location where patient will receive ongoing care

Purchased Care

- Do not bring patients in to MTF for one follow-up just to meet a metric
- If in purchased care, it should be arranged prior to discharge
- Suggestion: contact pt within 24 hours of discharge to ensure follow-up appt is within 7 days with their desired provider

Follow-Up after Hospitalization for Mental Illness: All

Applied filters: DATE equal to SEP2013 AND Rows SEP2013. Eligible greater than 20

DATA DATE			Eligible	SEP2013	
SERVICE	COMMAND	DMIS		30 Days Score	7 Days Score
AIR FORCE	PACAF	0638 INST: O SAN AB	22	100.0%	100.0%
ARMY	NRMC	0554 INST: JOINT (AF) BASE LANGLEY- EUSTIS	33	100.0%	100.0%
NAVY	NAVMED_VV	0208 INST: CAMP PENDLETON	22	100.0%	100.0%
ARMY	PRMC	0534 INST: SCHOFIELD BARRACKS	128	100.0%	98.41%
	ERMC	1017 INST: VILSECK	42	97.62%	97.62%
	PRMC	8903 INST: PYONGTAEK	37	97.30%	97.30%
	WRMC	1489 INST: JOINT (AF) BASE LEWIS- MCCHORD	38	100.0%	97.22%
NAVY	NAVMED_E	0370 INST: FORT WORTH	34	100.0%	97.06%
ARMY	SRMC	1550 INST: FT. GORDON	33	100.0%	96.97%
	WRMC	0204 INST: JOINT (AF) BSE ELMENDORF- RICHARDSON	81	98.36%	96.72%
NAVY	OPSFORCE	6303 INST: SAN DIEGO	82	97.56%	96.34%
AIR FORCE	PACAF	0804 INST: KADENA AB	27	100.0%	96.30%
NAVY	OPSFORCE	6318 INST: BREMERTON	27	100.0%	96.30%
ARMY	SRMC	7307 INST: FT CAMPBELL	245	98.78%	95.92%
		1592 INST: FT. HOOD	219	98.63%	95.89%
	ERMC	1016 INST: GRAFENVOEHR	24	100.0%	95.83%
	PRMC	8916 INST: SEOUL	44	97.73%	95.45%
NAVY	OPSFORCE	6320 INST: PEARL HARBOR	55	94.55%	94.55%
ARMY	SRMC	1506 INST: FT. CAMPBELL	85	97.65%	94.12%
	WRMC	1649 INST: JOINT (AF) BASE LEWIS- MCCHORD	50	96.00%	94.00%

Mental Health Follow-up Best Metrics

Depression list

Criteria to identify patients with depression in last 12 months:

- At least one principal diagnosis with the below ICD- 9 codes (outpatient, ED, inpatient) **OR**
- At least two secondary diagnoses with the below ICD-9 codes on separate encounter dates in any outpatient setting (ED included) **OR**
- At least one secondary diagnosis of major depression associated with any inpatient discharge

Codes to identify patients with Depression:

- ICD-9-Codes: 296.2, 296.3, 298.0, 300.4, 309.1, 311

Outpatient Visit Primary	Outpatient Visit Secondary	Inpatient Visit	ER Visit Primary	ER Visit Secondary
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	2			
5				

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Finding at risk depression patients

- Query 1: Depression ER Visit primary >0
- Query 2: Depression ER Visit secondary >0
- Query 3: Depression Inpt visit >0
- Query 4: No outpt primary dx visits
- Query 5: No outpt secondary dx visits
- Query 6: how many intersect

Available Data Sources		Available Fields				
DS_Depression (Primary)		Choose a field				
AND/OR	(	Selected Field	Operator	Value)	
	[	DS_Depression.ER Visit Primary	Greater Than	0		Delete
OR		DS_Depression.ER Visit Secondary	Greater Than	0		Delete
OR		DS_Depression.Inpatient Visit	Greater Than	0	)	Delete
AND	[	DS_Depression.Outpatient Visit Primary	Is Null	0		Delete
AND		DS_Depression.Outpatient Visit Secondary	Is Null	0	)	Delete

(ER visit or IP visit) and (No OP visit [IS NULL])



Available Data Sources: DS_Depression (Primary) Available Fields: Choose a field

AND/OR	(	Selected Field	Operator	Value)	
	[	DS_Depression.ER Visit Primary	Greater Than	0		Delete
OR		DS_Depression.ER Visit Secondary	Greater Than	0		Delete
OR		DS_Depression.Inpatient Visit	Greater Than	0	)	Delete
AND	[	DS_Depression.Outpatient Visit Primary	Is Null	0		Delete
AND		DS_Depression.Outpatient Visit Secondary	Is Null	0)	Delete

(ER visit or IP visit) and (No OP visit [IS NULL])



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Questions ?

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|



2013 Antidepressants

Description	Prescription		
Miscellaneous antidepressants	• Bupropion	• Vilazodone	
Monoamine oxidase inhibitors	• Isocarboxazid • Phenelzine	• Selegiline • Tranylcypromine	
Phenylpiperazine antidepressants	• Nefazodone	• Trazodone	
Psychotherapeutic combinations	• Amitriptyline-chlordiazepoxide • Amitriptyline-perphenazine	• Fluoxetine-olanzapine	
SSNRI antidepressants	• Desvenlafaxine • Duloxetine	• Venlafaxine	
SSRI antidepressants	• Citalopram • Escitalopram	• Fluoxetine • Fluvoxamine	• Paroxetine • Sertraline
Tetracyclic antidepressants	• Maprotiline	• Mirtazapine	
Tricyclic antidepressants	• Amitriptyline • Amoxapine • Clomipramine	• Desipramine • Doxepin • Imipramine	• Nortriptyline • Protriptyline • Trimipramine

Total number of days dispensed from all these meds are counted during the measurement periods.



Metric Benchmarks

	2013	2013	2014	2014
	75th	90th	75th	90th
Effective Acute Phase Treatment	70.04	73.43	73.72	78.32
Effective Continuation Phase Treatment	54.05	57.75	58.36	62.65
Mental Health Foll-up After Hosp in 7	69.01	76.21	68.96	75.44
Mental Health Foll-up After Hosp in 30	84.29	89.21	84.21	88



300.4 **Dysthymic disorder**

Anxiety depression

Depression with anxiety

Depressive reaction

Neurotic depressive state

Reactive depression

EXCLUDES *adjustment reaction with depressive symptoms (309.0-309.1)*
depression NOS (311)
manic-depressive psychosis, depressed type (296.2-296.3)
reactive depressive psychosis (298.0)